

□Duplicate

## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

Application Number	10/617,807				
Filing Date*	July 14, 2003				
First Named Inventor	ни				
Group Art Unit	2627				
Examiner Name	T.A. Goma				
Attorney Docket No.	BHT/3212-31				

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

NOTE: \* Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

1.	1. Please consider the following as the required submission under 37 C.F.R. §1.114:												
		a. The Amendment/Reply filed on:											
		b. The	The Information Disclosure Statement (IDS) filed on (date):										
		c. The	The Brief/Reply Brief filed on (date):										
		d. The	The page(s) of Form PTO-1449 and copy of each listed document filed (date):										
	×	e. Oth	. Other: Amendment Under 37 C.F.R. § 1.116 filed herewith.										
×	2.	A <u>TWO-</u> month Petition for Extension of Time is filed herewith.											
×	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 501874.											
×	4.	A check is hereby given in the amount of \$1,270 to cover the Large Entity Filing Fee (\$810) and the Large Entity Extension Fee (\$460). A duplicate of this form is enclosed herewith.											
	5.	This Request is transmitted by facsimile to number (703)											
	G. Other:												
THE DOE SEE IS CALCULATED AS FOLLOWS.													
	THE RCE FEE IS CALCULATED AS FOLLOWS: Basic Fee										\$810.00		
Total Claims: 13 -				\ <u>-</u> .	20	(highest number previously paid for) = 0.00			X \$18 =	0			
Independent Claims: 2 -				<b>.</b>	3	(highest number previously paid for) = 0.00			X \$86 =	0			
Correspondence Address: Multiple Dependent Claim (add \$280.00):										add \$280.00):	0		
TROXELL LAW OFFICE PLLC 5205 Leesburg Pike, Suite 1404 Falls Church, VA 22041						Subtotal:				\$810.00			
CUSTOMER NUMBER: 40144 50% Reduction if Small Entity Status:													
Phone: 703-575-2711 Fax: 703-575-2707 Total:										\$810.00			
Date: Name:						Name:	Signature:			Reg. No.			
March 4, 2008						Bruce H. Troxell				26,592			

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